

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	MD		2-29-00
FORMALITY REVIEW	MHW	59	03-10-00
RESPONSE FORMALITY REVIEW			
		60874	4-20-00

INDEX OF CLAIMS

- ✓ Rejected
- = Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓		
2	✓		
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50	✓		

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If more than 150 claims or 10 actions
staple additional sheet here

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